



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 1590

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/663,445	09/16/2003	235	3734	460.2299USQ		
<b>RULE</b>						
<b>APPLICANTS</b> Joshua Lieberman, Pompton Lakes, NJ; John Rousso, Trumbull, CT; Joel Brown, Hoboken, NJ;						
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/272,475 10/16/2002 PAT 7,122,045 which is a CIP of 10/054,510 11/13/2001 PAT 6,645,228 This application 10/663,445 09/16/2003 is a CIP of 09/906,320 07/16/2001 PAT 7,163,113 which is a CON of 29/121,308 04/05/2000 PAT D,445,193 This application 10/663,445 09/16/2003 is a CIP of 09/639,508 08/16/2000 which is a DIV of 09/209,070 12/10/1998 PAT 6,138,710						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/05/2003						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Examiner's Signature <i>[Signature]</i>		<input type="checkbox"/> Met after Allowance Initials <i>[Initials]</i>	<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWINGS</b> 7	<b>TOTAL CLAIMS</b> 33	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> CHARLES N.J. RUGGIERO, ESQ. OHLANDT, GREELEY, RUGGIERO & PERLE, L.L.P. 10TH FLOOR ONE LANDMARK SQUARE STAMFORD, CT 06901-2682 UNITED STATES						
<b>TITLE</b> Vented bottle						
<b>FILING FEE RECEIVED</b> 1134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			